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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *AMB*\*\* FOREIGN APPLICATIONS \*\*\*\*\* *AMB*IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
 \*\* 08/27/2003

\*\* SMALL ENTITY \*\*

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>Angela M. P...</i> Examiner's Signature	STATE OR COUNTRY CA	SHEETS DRAWING 9	TOTAL CLAIMS 77	INDEPENDENT CLAIMS 6
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## TITLE

Methods and compositions for whole genome amplification and genotyping

FILING FEE  RECEIVED 1014	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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